FORM 4

Check box if no longer
subject to Section 16.
Form 4 or Form 5
obligations may continue
See instruction 1(b).

Federal Deposit Insurance Corporation Washington, D.C. 20429

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

(PLEASE PRINT OR TYPE ALL RESPONSES)

OMB APPROVAL

OMB NUMBER: 3064-0030 EXPIRES: 07/31/2013 Estimated average burden hours per response ...0.5

1. Name of Reporting Person (Last, First, MI)*				2. Issuer Name	and Tickler	r or Tradin	ıg Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Jenkins, Julie	Northeast Bank	[NBN]				Director 10% Owner									
Street Address C/O Northeast Bank 27 Pearl Street	 Date of Earliest Transaction Required to be Reported (Month/Day/Year) 08/25/2020 			. If Amendment, D Filed <i>(Month/Day</i>		Officer (Give title below) Other (Specify below) SVP, Director of Operations 6. Individual or Joint/Group Filing (Check applicable box) Form filed by One Reporting Person									
City	1					Form filed by More than One Reporting Person									
Portland	ME		04101												
			Table	I - Non-Deriv	ative Sec	curities	Acquired, Disp	osed of, oi	r Beneficially (Owned					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execu- tion Date if any, (Month/ Day/ Year)	3. Transaction Code (Instr. 8)		4. Securities Acc of (D) (Instrs.)	uired (A) or E		5. Amount of Securities Beneficially Owned Follow- ing Reported	6. Ownership Form Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	-		
					Code	V	Amount	(A) or (D)	Price	Transactions (Instr. 3 and 4)	(
Voting Common Stock		08/25	5/2020		F		978	D	\$19.24	20,527	D				

FDIC 6800/04 (10-05)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. *(Continue on Page 2)* *If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Page ____ of ____

	Table II -	Derivative	e Securities	Acquir	ed, Disj	posed o	f or Ber	n e ficia lly	Owned (e.g., puts, calls	, warrants	, options,	convertible s	ecurities)	
1. Title of Derivative Security (Instr. 3)	2. Con- version or Ex- ercise Price of De- rivative Secu- rity	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execu- tion Date if any, (Month/ Day/ Year)	4. Trans action Code (Instr	1	or	ntive ities red (A) sed of 4. 3, 4,	6. Date Exercisable and Expiration Date (Month/ Day/Year)		 7. Title and Amount of Underlying Securities (Instrs. 3 and 4) 		8. Price of De- rivative Security (Instr. 5)	9. Number of Derivative Securities Beneficiall y Owned Following Reported Trans- action(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Ex- ercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	

Explanation of Responses:

/s/ Jean-Pierre Lapointe, Attorney-in-fact

8/25/2020

**Signature of Reporting Person

Date

NOTE: File three copies of this form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure (12 C.F.R. 335.612). Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a current, valid OMB Control Number. **Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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